Communicable Disease Epidemiology and **Immunization Section**

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Health Advisory: Hepatitis A in a Child at Lakeside Montessori School, Issaquah – 6 May 2015

Action requested:

- Be aware of an acute hepatitis A case in an unvaccinated child who attends Lakeside
 Montessori School in Issaquah (Pine Lake Campus) while contagious. A notification letter
 recommending symptom watch and vaccination for persons not up to date is being sent to staff
 and parents of all attendees.
- Administering hepatitis A vaccine (or IG, see below) to un- or under-immunized persons to prevent illness as soon as possible after exposure.
- Test patients with illnesses suggestive of hepatitis A infection. Symptoms include fever; fatigue; decreased appetite; nausea; diarrhea; and abdominal pain; which jaundice and pale stools may follow. Children are often asymptomatic or have mild illness. Hepatitis A cannot be reliably diagnosed on clinical presentation alone confirm suspected hepatitis A infection by ordering IgM anti-hepatitis A testing. (NOT total antibody or IgG).
- Advise exposed patients to monitor their health for symptoms of acute hepatitis for <u>50 days</u> after exposure and to seek medical evaluation if symptoms develop.
- Report suspected cases to Public Health at 206-296-4774.

Background: The case attended school during their contagious period (April 10, 2015–May 4, 2015). Over 200 children and staff were potentially exposed to the case during this time. No secondary cases have been identified thus far, but cases resulting from this exposure would be expected to occur during April 25-June 23, 2015. The source of the child's infection remains under investigation; however, the child did not travel during the exposure period indicating that the child's infection was acquired locally.

Public Health is reviewing hepatitis A immunization records for all attendees of Lakeside Montessori School using the Washington State Immunization Information System and will be calling parents of children who are not up to date for hepatitis A vaccine to recommend post-exposure prophylaxis. Letters are being sent by Public Health to staff and parents recommending they verify their child's vaccination status, get their child vaccinated if not up to date, and monitor for symptoms of hepatitis A for 50 days after exposure. Parents are being advised to keep their children home from school if diarrhea or other symptoms develop and have the child promptly evaluated by a medical provider.

<u>Post-exposure prophylaxis</u> for hepatitis A for persons who have been exposed to hepatitis A virus and who previously have not received hepatitis A vaccine:

- For healthy persons aged 12 months-40 years, single-antigen hepatitis A vaccine series at the
 age-appropriate dose is preferred to IG because of vaccine advantages that include long-term
 protection and ease of administration. People who have received a dose of hepatitis A vaccine
 before exposure to HAV do not need to receive a second dose of vaccine until at least 6 months
 following the first dose.
- For persons aged >40 years and those with chronic lever disease, IG might be preferred
 because of the absence of information regarding vaccine performance and the more severe
 manifestations of hepatitis A in these groups; however, vaccine can be used if IG is not
 available. The decision to administer IG versus vaccine should be made on a case-by-case
 basis. The efficacy of IG or vaccine administered >2 weeks after exposure has not been
 established.
- For immune compromised persons, persons <12 months, those with chronic liver disease or other contraindications to hepatitis A vaccine, IG is recommended.